



INFORMATION FOR THE MEDICAL COMMUNITY AND THE PUBLIC
FROM THE
D.C. BOARD OF MEDICINE

June 2006

***ENDING A PHYSICIAN-PATIENT
RELATIONSHIP***

The American Medical Association developed the information below for the benefit of its members, physicians generally and the public. The D.C. Board of Medicine will be guided by the policy presented.

Once a physician-patient relationship is begun, a physician generally is under both an ethical and legal obligation to provide service as long as the patient needs the physician. There may be times, however, when a physician may no longer be able to provide care. It may be that the patient is non-compliant, unreasonably demanding, threatening to the physician or the physician's staff, or otherwise contributing to a breakdown in the physician-patient relationship. It also may be necessary to end the relationship simply due to relocation, retirement, or unanticipated termination of a managed care plan and/or employer.

Regardless of the underlying situation, to avoid a claim of "patient abandonment," a physician must follow appropriate steps to terminate the physician-patient relationship. "Abandonment" is defined as the termination of a professional relationship between a physician and patient at an unreasonable time and without giving the patient the chance to find an equally qualified replacement. To prove abandonment, a patient must prove that the physician ended the relationship at a critical stage of the patient's treatment without good reason or sufficient notice to allow the patient to find another

physician, and the patient was injured as a result. Usually expert evidence is required to establish whether termination in fact happened at a critical stage of treatment.

A physician who does not terminate the physician-patient relationship properly may also run afoul of ethical requirements. According to the AMA's Council on Ethical and Judicial Affairs, a physician may not discontinue treatment as long as further treatment is medically indicated without giving the patient reasonable notice and sufficient opportunity to make alternative arrangements for care. Further, the patient's failure to pay a bill does not end the relationship, as the relationship is based on a fiduciary—rather than a financial—relationship. According to the AMA's Code of Medical Ethics, Opinion 8.115, physicians have the option of terminating the physician-patient relationship, but they must give sufficient notice of withdrawal to the patient, responsible relatives or guardians to allow another physician to be secured.

Appropriate steps to terminate the physician-patient relationship include:

- Giving the patient written notice, preferably by certified mail, return receipt requested;
- Providing the patient with a brief explanation for terminating the relationship (This should be a valid reason, *e.g.* non-compliance, failure to keep appointments, *etc.*);
- Agreeing to continue to provide treatment and access to services for a reasonable period of

time, such as 30 days, to allow a patient to secure care from another physician (A physician may want to extend the period for emergency services.);

- Providing resources and/or recommendations to help a patient locate another physician of like specialty; and
- Offering to transfer records to a new physician with a signed patient authorization to do so.

Following this protocol may be easier in some situations than others. For example, if a physician has signed a covenant-not-to-compete, chances are that the employer will not hand over the patient list upon notice of departure. In instances such as that one, the physician (in consultation with an attorney) may want to provide a model patient termination letter to the party withholding the patient's addresses and request that the addresses be merged for distribution to patients. Ideally physicians should not be in a contractual relationship that makes contacting patients difficult. Physicians should consult with an attorney to ensure that appropriate steps are taken.

RENEWAL REMINDER

D.C. medical licenses expire on December 31, 2006. Passwords to renew on line will be distributed during September. To ensure that you get your password, please ensure that the Board has your current address. You can look on your wallet ID card or check your address of record at the website shown below:

<http://app.hpla.doh.dc.gov/weblookup/>

Also, please remember that you must be prepared to document successful completion of twenty-five hours of ACGME or AOA-approved Category I continuing medical education when you renew. The Board will allow on-line CME credits as long as they are ACGME or AOA-approved.

POSTGRADUATE MEDICAL EDUCATION IN D.C.

The Federation of State Medical Boards recently released the 2005 results for physicians who took Step 3 of the USMLE examination. Ninety-eight percent of those who took the examination in D.C. passed, as compared to 94% nationally.

The Board sends its congratulations to all the D.C. graduate medical education programs that contributed to the success in 2005.

BOARD ORDERS

March-May 2006

Revoked

Vaughn, William S. (5/16/06) The physician's D.C. medical license was revoked for prescription irregularities. [Emer. Med.]

Inocencio, Narciso (5/8/06) The physician's D.C. medical license was revoked as a result of disciplinary action in Maryland for prescription irregularities. [Psych. & Neur.]

Summarily Suspended

Bassett, David W. (4/26/06) The physician's D.C. medical license was summarily suspended for conduct that represented an imminent danger to the health and safety of the residents of the District of Columbia. The physician's Maryland license was revoked as a result of prescription irregularities, including prescribing drugs in quantities generally considered to be the lethal limit. [Psych. & Neur.]

Suspended

Tullner, William (5/4/06) The physician's D.C. medical license was suspended indefinitely upon voluntary surrender as a result of a medical condition that adversely affects his ability to practice medicine. [Int. Med.]

Probation, Reprimanded, Remediation

Slatkin, Stephen E. (5/31/06) The physician's D.C. medical license was placed on three years probation. The physician was also reprimanded and required to have a chart review, a psychiatric evaluation and complete CME. The physician was disciplined in Maryland for boundary violations. [Psych. & Neur.]

Probation

Jackson, Hampton (5/31/06) The physician's D.C. medical license was placed on probation *nunc pro tunc* to January 22, 2004 until such time as he has met all the terms and conditions of his Maryland order. The physician was disciplined in Maryland for quality of care issues. [Orth. Surg.]

Probation Terminated

Trent, Peter S. (5/3/06) Probation terminated. The physician satisfied the terms of his probation. [Orth. Surg.]

The D.C. Board of Medicine

The current members of the Board are:

Frederick C. Finelli, M.D., J.D. Physician Member and Chairperson;

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James A. Towns, Esq., Consumer Member;

Raymond K. Tu, M.D., Physician Member; and

Cheryl R. Williams, M.D., Physician Member

The Board staff includes **Mr. James R. Granger, Jr.,** Executive Director, **Ms. Alesia Henry, Ms. Lisa Robinson** and **Ms. Antoinette Stokes,** Health Licensing specialists. The Board's phone number is (202) 724-8800. The fax number is (202) 724-8677.